



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
SECTION FOR CHILD CARE REGULATION
FACILITY DIRECTOR APPROVAL REQUEST

Send to:
Child Care Specialist
Local SCCR Office

TO BE COMPLETED BY FACILITY OWNER/DESIGNEE

NAME OF FACILITY	LICENSED CAPACITY
ADDRESS (STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER
NAME OF PROPOSED DIRECTOR	DATE OF HIRE

DOCUMENTS REQUIRED TO BE ON FILE AT THE FACILITY

- SCCR CERTIFICATION OF FACILITY DIRECTOR (BCC-71). *Required before beginning work as director.*
- MEDICAL EXAMINATION REPORT (BCC-4). *Required on file within 30 days of new employee beginning work as director.*
- TUBERCULIN CLEARANCE REPORT. *Required on file within 30 days of new employee beginning work as director.*
- RESULTS FROM BACKGROUND CHECK. *Licensee must request within 15 days of date new employee begins work as director.*

AGREEMENTS

1. The facility director shall be routinely on duty on the premises a minimum of forty (40) hours per week during the hours of highest attendance
2. If the facility operates less than forty (40) hours per week, the facility director shall be routinely on duty on the premises at least fifty (50%) percent of the operating hours.
3. The facility director shall not be engaged in any other employment while on duty.
4. In the absence of the facility director, another responsible individual shall be designated in charge of the facility.
5. The owner(s), board president or chairperson shall notify the Department immediately if the approved facility director is no longer employed in that position.

SIGNATURE OF FACILITY OWNER/DESIGNEE	DATE
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SCCR OFFICE USE ONLY

APPROVAL DETERMINATION

THE PROPOSED DIRECTOR NAMED ABOVE IS APPROVED IS NOT APPROVED TO BE THE QUALIFIED DIRECTOR OF THE ABOVE NAMED FACILITY.

Certification Date: _____ Capacity: Up to _____ Children

Background Check Date _____ Medical Exam Date _____ TB Date _____

SIGNATURE OF REVIEWER	DATE
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